

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

TEXAS RIGHT TO LIFE POLITICAL ACTION C

Report Covering the Period: From: / / To: / /

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2014"/>	<input type="text" value="10082.51"/>	<input type="text" value="10082.51"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="7385.13"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="0.00"/>	<input type="text" value="3080.00"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="7385.13"/>	<input type="text" value="13162.51"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="346.48"/>	<input type="text" value="6123.86"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="7038.65"/>	<input type="text" value="7038.65"/>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	

This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E Street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE
of Receipts

Write or Type Committee Name

TEXAS RIGHT TO LIFE POLITICAL ACTION C

Report Covering the Period: From: / / To: / /

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	0.00	2980.00
(ii) Unitemized	0.00	100.00
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	0.00	3080.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	0.00	3080.00
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))..... ▶	0.00	3080.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	0.00	3080.00

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	0.00	32.79
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	0.00	32.79
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	5000.00
24. Independent Expenditures (use Schedule E)	346.48	1091.07
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements	0.00	0.00
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	346.48	6123.86
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	346.48	6123.86

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	0.00	3080.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	0.00	3080.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	0.00	32.79
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	0.00	32.79

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
TEXAS RIGHT TO LIFE POLITICAL ACTION C
FEC IDENTIFICATION NUMBER
C C00419242
Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee
Advanced Litho Printing
Mailing Address
226 9th Avenue South
City
Great Falls State
MT Zip Code
59405
Purpose of Expenditure
PRINTING NEWSLETTER WITH VOTER GUIDE
Category/Type
004
Name of Federal Candidate
JOHN CORNYN
Support
Office Sought:
Senate State: TX
Calendar Year-To-Date
Per Election for Office Sought
10.06

Date of Public Distribution/Dissemination
Amount
10.06
Transaction ID : SE.5457
Date of Disbursement or Obligation
11 / 03 / 2014
Disbursement For:
General
2014

Full Name of Payee
Advanced Litho Printing
Mailing Address
226 9th Avenue South
City
Great Falls State
MT Zip Code
59405
Purpose of Expenditure
PRINTING NEWSLETTER WITH VOTER GUIDE
Category/Type
004
Name of Federal Candidate
LOUIE GOHMERT
Support
Office Sought:
House District: 01 State: TX
Calendar Year-To-Date
Per Election for Office Sought
10.06

Date of Public Distribution/Dissemination
Amount
10.06
Transaction ID : SE.5458
Date of Disbursement or Obligation
11 / 03 / 2014
Disbursement For:
General
2014

(a) SUBTOTAL of Itemized Independent Expenditures..... 20.12
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures.....

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.
Mrs. Teresa Doyle
[Electronically Filed]
Date 12 / 22 / 2014
Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
TEXAS RIGHT TO LIFE POLITICAL ACTION C
FEC IDENTIFICATION NUMBER
C C00419242
Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee
Advanced Litho Printing
Mailing Address
226 9th Avenue South
City
Great Falls State
MT Zip Code
59405
Purpose of Expenditure
PRINTING NEWSLETTER WITH VOTER GUIDE
Category/Type
004

Date of Public Distribution/Dissemination
Amount
10.06
Transaction ID : SE.5460
Date of Disbursement or Obligation
11 / 03 / 2014

Name of Federal Candidate
TED POE
Support
Office Sought: House
District: 02
State: TX

Disbursement For:
General
2014

Full Name of Payee
Advanced Litho Printing
Mailing Address
226 9th Avenue South
City
Great Falls State
MT Zip Code
59405
Purpose of Expenditure
PRINTING NEWSLETTER WITH VOTER GUIDE
Category/Type
004

Date of Public Distribution/Dissemination
Amount
10.06
Transaction ID : SE.5461
Date of Disbursement or Obligation
11 / 03 / 2014

Name of Federal Candidate
SAMUEL R HON. JOHNSON
Support
Office Sought: House
District: 03
State: TX

Disbursement For:
General
2014

(a) SUBTOTAL of Itemized Independent Expenditures..... 20.12
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures.....

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Mrs. Teresa Doyle
[Electronically Filed]
Date
12 / 22 / 2014
Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) TEXAS RIGHT TO LIFE POLITICAL ACTION C	FEC IDENTIFICATION NUMBER ▼ C C00419242
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on M M M / D D D / Y Y Y Y Y Y	

Full Name of Payee Advanced Litho Printing	Date of Public Distribution/Dissemination M M M / D D D / Y Y Y Y Y Y
Mailing Address 226 9th Avenue South	Amount 10.06
City State Zip Code Great Falls MT 59405	Transaction ID : SE.5462 Date of Disbursement or Obligation M M M / D D D / Y Y Y Y Y Y 11 / 03 / 2014
Purpose of Expenditure PRINTING NEWSLETTER WITH VOTER GUIDE	Category/Type 004
Name of Federal Candidate JOHN LEE RATCLIFFE	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate District: 04 State: TX
Calendar Year-To-Date Per Election for Office Sought 53.77	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶

Full Name of Payee Advanced Litho Printing	Date of Public Distribution/Dissemination M M M / D D D / Y Y Y Y Y Y
Mailing Address 226 9th Avenue South	Amount 10.06
City State Zip Code Great Falls MT 59405	Transaction ID : SE.5463 Date of Disbursement or Obligation M M M / D D D / Y Y Y Y Y Y 11 / 03 / 2014
Purpose of Expenditure PRINTING NEWSLETTER WITH VOTER GUIDE	Category/Type 004
Name of Federal Candidate JEB MR. HENSARLING	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate District: 05 State: TX
Calendar Year-To-Date Per Election for Office Sought 10.06	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	20.12
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	
(c) TOTAL Independent Expenditures..... ▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Mrs. Teresa Doyle [Electronically Filed] Date M M M / D D D / Y Y Y Y Y Y
12 / 22 / 2014

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
TEXAS RIGHT TO LIFE POLITICAL ACTION C
FEC IDENTIFICATION NUMBER
C C00419242
Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee
Advanced Litho Printing
Mailing Address
226 9th Avenue South
City
Great Falls State
MT Zip Code
59405
Purpose of Expenditure
PRINTING NEWSLETTER WITH VOTER GUIDE
Category/Type
004
Name of Federal Candidate
JOE LINUS BARTON
Support
Office Sought: House District: 06
State: TX
Calendar Year-To-Date
Per Election for Office Sought
10.06

Date of Public Distribution/Dissemination
Amount
10.06
Transaction ID : SE.5464
Date of Disbursement or Obligation
11 / 03 / 2014
Disbursement For: General
2014

Full Name of Payee
Advanced Litho Printing
Mailing Address
226 9th Avenue South
City
Great Falls State
MT Zip Code
59405
Purpose of Expenditure
PRINTING NEWSLETTER WITH VOTER GUIDE
Category/Type
004
Name of Federal Candidate
JOHN CULBERSON
Support
Office Sought: House District: 07
State: TX
Calendar Year-To-Date
Per Election for Office Sought
10.06

Date of Public Distribution/Dissemination
Amount
10.06
Transaction ID : SE.5465
Date of Disbursement or Obligation
11 / 03 / 2014
Disbursement For: General
2014

(a) SUBTOTAL of Itemized Independent Expenditures..... 20.12
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures.....

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Mrs. Teresa Doyle
[Electronically Filed]
Date 12 / 22 / 2014
Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) TEXAS RIGHT TO LIFE POLITICAL ACTION C	FEC IDENTIFICATION NUMBER ▼ C C00419242
--	--

Check if 24-hour report 48-hour report New report Amends report filed on / /

Full Name of Payee Advanced Litho Printing		Date of Public Distribution/Dissemination <input type="text" value="M M M"/> / <input type="text" value="D D D"/> / <input type="text" value="Y Y Y Y Y Y Y Y"/>	
Mailing Address 226 9th Avenue South		Amount <input type="text" value="10.06"/>	
City Great Falls	State MT	Zip Code 59405	Transaction ID : SE.5466
Purpose of Expenditure PRINTING NEWSLETTER WITH VOTER GUIDE		Category/Type <input type="text" value="004"/>	Date of Disbursement or Obligation <input type="text" value="M M M"/> / <input type="text" value="D D D"/> / <input type="text" value="Y Y Y Y Y Y Y Y"/> <input type="text" value="11"/> / <input type="text" value="03"/> / <input type="text" value="2014"/>
Name of Federal Candidate KEVIN BRADY		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: <u>08</u> <input type="checkbox"/> President <input type="checkbox"/> Senate State: <u>TX</u>
Calendar Year-To-Date Per Election for Office Sought		<input type="text" value="10.06"/>	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶ _____

Full Name of Payee Advanced Litho Printing		Date of Public Distribution/Dissemination <input type="text" value="M M M"/> / <input type="text" value="D D D"/> / <input type="text" value="Y Y Y Y Y Y Y Y"/>	
Mailing Address 226 9th Avenue South		Amount <input type="text" value="10.06"/>	
City Great Falls	State MT	Zip Code 59405	Transaction ID : SE.5467
Purpose of Expenditure PRINTING NEWSLETTER WITH VOTER GUIDE		Category/Type <input type="text" value="004"/>	Date of Disbursement or Obligation <input type="text" value="M M M"/> / <input type="text" value="D D D"/> / <input type="text" value="Y Y Y Y Y Y Y Y"/> <input type="text" value="11"/> / <input type="text" value="03"/> / <input type="text" value="2014"/>
Name of Federal Candidate MICHAEL MCCAUL		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: <u>10</u> <input type="checkbox"/> President <input type="checkbox"/> Senate State: <u>TX</u>
Calendar Year-To-Date Per Election for Office Sought		<input type="text" value="10.06"/>	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶ _____

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	<input type="text" value="20.12"/>
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	<input type="text"/>
(c) TOTAL Independent Expenditures..... ▶	<input type="text"/>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Mrs. Teresa Doyle [Electronically Filed] Date / /
12 / 22 / 2014

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) TEXAS RIGHT TO LIFE POLITICAL ACTION C		FEC IDENTIFICATION NUMBER C C00419242
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on		MM / DD / YYYY

Full Name of Payee Advanced Litho Printing		Date of Public Distribution/Dissemination MM / DD / YYYY
Mailing Address 226 9th Avenue South		Amount 10.06
City Great Falls	State MT	Zip Code 59405
Purpose of Expenditure PRINTING NEWSLETTER WITH VOTER GUIDE	Category/Type 004	Transaction ID : SE.5468 Date of Disbursement or Obligation MM / DD / YYYY 11 / 03 / 2014
Name of Federal Candidate MICHAEL HONORABLE CONAWAY	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: <u>11</u> <input type="checkbox"/> President <input type="checkbox"/> Senate State: <u>TX</u>
Calendar Year-To-Date Per Election for Office Sought	10.06	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶

Full Name of Payee Advanced Litho Printing		Date of Public Distribution/Dissemination MM / DD / YYYY
Mailing Address 226 9th Avenue South		Amount 10.07
City Great Falls	State MT	Zip Code 59405
Purpose of Expenditure PRINTING NEWSLETTER WITH VOTER GUIDE	Category/Type 004	Transaction ID : SE.5469 Date of Disbursement or Obligation MM / DD / YYYY 11 / 03 / 2014
Name of Federal Candidate MAC THORBERRY	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: <u>13</u> <input type="checkbox"/> President <input type="checkbox"/> Senate State: <u>TX</u>
Calendar Year-To-Date Per Election for Office Sought	10.07	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	20.13
(b) SUBTOTAL of Unitemized Independent Expenditures.....▶	
(c) TOTAL Independent Expenditures.....▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Mrs. Teresa Doyle
Signature

[Electronically Filed] Date MM / DD / YYYY
12 / 22 / 2014

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) TEXAS RIGHT TO LIFE POLITICAL ACTION C	FEC IDENTIFICATION NUMBER ▼ C C00419242
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on M M M / D D D / Y Y Y Y Y Y	

Full Name of Payee Advanced Litho Printing	Date of Public Distribution/Dissemination M M M / D D D / Y Y Y Y Y Y
Mailing Address 226 9th Avenue South	Amount 10.07
City Great Falls	State MT
Zip Code 59405	Transaction ID : SE.5470
Purpose of Expenditure PRINTING NEWSLETTER WITH VOTER GUIDE	Date of Disbursement or Obligation M M M / D D D / Y Y Y Y Y Y 11 / 03 / 2014
Name of Federal Candidate RANDY WEBER	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate District: 14 State: TX
Calendar Year-To-Date Per Election for Office Sought 10.07	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶

Full Name of Payee Advanced Litho Printing	Date of Public Distribution/Dissemination M M M / D D D / Y Y Y Y Y Y
Mailing Address 226 9th Avenue South	Amount 10.07
City Great Falls	State MT
Zip Code 59405	Transaction ID : SE.5471
Purpose of Expenditure PRINTING NEWSLETTER WITH VOTER GUIDE	Date of Disbursement or Obligation M M M / D D D / Y Y Y Y Y Y 11 / 03 / 2014
Name of Federal Candidate BILL FLORES	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate District: 17 State: TX
Calendar Year-To-Date Per Election for Office Sought 10.07	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	20.14
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	
(c) TOTAL Independent Expenditures..... ▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Mrs. Teresa Doyle [Electronically Filed] Date M M M / D D D / Y Y Y Y Y Y
12 / 22 / 2014

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) TEXAS RIGHT TO LIFE POLITICAL ACTION C	FEC IDENTIFICATION NUMBER ▼ C C00419242
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on M M M / D D D / Y Y Y Y Y Y	

Full Name of Payee Advanced Litho Printing	Date of Public Distribution/Dissemination M M M / D D D / Y Y Y Y Y Y
Mailing Address 226 9th Avenue South	Amount 10.07
City Great Falls	State MT
Zip Code 59405	Transaction ID : SE.5473
Purpose of Expenditure PRINTING NEWSLETTER WITH VOTER GUIDE	Date of Disbursement or Obligation M M M / D D D / Y Y Y Y Y Y 11 / 03 / 2014
Name of Federal Candidate RANDY NEUGEBAUER	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate District: 19 State: TX
Calendar Year-To-Date Per Election for Office Sought 10.07	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶

Full Name of Payee Advanced Litho Printing	Date of Public Distribution/Dissemination M M M / D D D / Y Y Y Y Y Y
Mailing Address 226 9th Avenue South	Amount 10.07
City Great Falls	State MT
Zip Code 59405	Transaction ID : SE.5474
Purpose of Expenditure PRINTING NEWSLETTER WITH VOTER GUIDE	Date of Disbursement or Obligation M M M / D D D / Y Y Y Y Y Y 11 / 03 / 2014
Name of Federal Candidate LAMAR SMITH	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate District: 21 State: TX
Calendar Year-To-Date Per Election for Office Sought 10.07	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	20.14
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	
(c) TOTAL Independent Expenditures..... ▶	

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Mrs. Teresa Doyle

[Electronically Filed]

Date M M M / D D D / Y Y Y Y Y Y
12 / 22 / 2014

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) TEXAS RIGHT TO LIFE POLITICAL ACTION C	FEC IDENTIFICATION NUMBER ▼ C C00419242
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on M M M / D D D / Y Y Y Y Y Y	

Full Name of Payee Advanced Litho Printing	Date of Public Distribution/Dissemination M M M / D D D / Y Y Y Y Y Y
Mailing Address 226 9th Avenue South	Amount 10.07
City State Zip Code Great Falls MT 59405	Transaction ID : SE.5476 Date of Disbursement or Obligation M M M / D D D / Y Y Y Y Y Y 11 / 03 / 2014
Purpose of Expenditure PRINTING NEWSLETTER WITH VOTER GUIDE	Category/Type 004
Name of Federal Candidate PETER GRAHAM OLSON	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate District: 22 State: TX
Calendar Year-To-Date Per Election for Office Sought 10.07	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶

Full Name of Payee Advanced Litho Printing	Date of Public Distribution/Dissemination M M M / D D D / Y Y Y Y Y Y
Mailing Address 226 9th Avenue South	Amount 10.07
City State Zip Code Great Falls MT 59405	Transaction ID : SE.5477 Date of Disbursement or Obligation M M M / D D D / Y Y Y Y Y Y 11 / 03 / 2014
Purpose of Expenditure PRINTING NEWSLETTER WITH VOTER GUIDE	Category/Type 004
Name of Federal Candidate KENNY E MR. MARCHANT	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate District: 24 State: TX
Calendar Year-To-Date Per Election for Office Sought 10.07	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	20.14
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	
(c) TOTAL Independent Expenditures..... ▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Mrs. Teresa Doyle
Signature

[Electronically Filed]

Date M M M / D D D / Y Y Y Y Y Y
12 / 22 / 2014

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) TEXAS RIGHT TO LIFE POLITICAL ACTION C	FEC IDENTIFICATION NUMBER ▼ C C00419242
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on M M M / D D D / Y Y Y Y Y Y	

Full Name of Payee Advanced Litho Printing	Date of Public Distribution/Dissemination M M M / D D D / Y Y Y Y Y Y
Mailing Address 226 9th Avenue South	Amount 10.07
City Great Falls	State MT
Zip Code 59405	Transaction ID : SE.5478
Purpose of Expenditure PRINTING NEWSLETTER WITH VOTER GUIDE	Date of Disbursement or Obligation M M M / D D D / Y Y Y Y Y Y 11 / 03 / 2014
Name of Federal Candidate ROGER WILLIAMS	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House District: <u>25</u> <input type="checkbox"/> President <input type="checkbox"/> Senate State: <u>TX</u>
Calendar Year-To-Date Per Election for Office Sought 10.07	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶

Full Name of Payee Advanced Litho Printing	Date of Public Distribution/Dissemination M M M / D D D / Y Y Y Y Y Y
Mailing Address 226 9th Avenue South	Amount 10.07
City Great Falls	State MT
Zip Code 59405	Transaction ID : SE.5479
Purpose of Expenditure PRINTING NEWSLETTER WITH VOTER GUIDE	Date of Disbursement or Obligation M M M / D D D / Y Y Y Y Y Y 11 / 03 / 2014
Name of Federal Candidate MICHAEL C DR. BURGESS	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House District: <u>26</u> <input type="checkbox"/> President <input type="checkbox"/> Senate State: <u>TX</u>
Calendar Year-To-Date Per Election for Office Sought 10.07	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	20.14
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	
(c) TOTAL Independent Expenditures..... ▶	

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Mrs. Teresa Doyle

[Electronically Filed]

Date M M M / D D D / Y Y Y Y Y Y
12 / 22 / 2014

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) TEXAS RIGHT TO LIFE POLITICAL ACTION C	FEC IDENTIFICATION NUMBER ▼ C C00419242
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on M M M / D D D / Y Y Y Y Y Y	

Full Name of Payee Advanced Litho Printing	Date of Public Distribution/Dissemination M M M / D D D / Y Y Y Y Y Y
Mailing Address 226 9th Avenue South	Amount 10.07
City Great Falls	State MT
Zip Code 59405	Transaction ID : SE.5480
Purpose of Expenditure PRINTING NEWSLETTER WITH VOTER GUIDE	Date of Disbursement or Obligation M M M / D D D / Y Y Y Y Y Y 11 / 03 / 2014
Name of Federal Candidate RANDOLPH BLAKE FARENTHOLD	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate District: 27 State: TX
Calendar Year-To-Date Per Election for Office Sought 10.07	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶

Full Name of Payee Advanced Litho Printing	Date of Public Distribution/Dissemination M M M / D D D / Y Y Y Y Y Y
Mailing Address 226 9th Avenue South	Amount 10.07
City Great Falls	State MT
Zip Code 59405	Transaction ID : SE.5481
Purpose of Expenditure PRINTING NEWSLETTER WITH VOTER GUIDE	Date of Disbursement or Obligation M M M / D D D / Y Y Y Y Y Y 11 / 03 / 2014
Name of Federal Candidate JOHN CARTER	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate District: 31 State: TX
Calendar Year-To-Date Per Election for Office Sought 10.07	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	20.14
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	
(c) TOTAL Independent Expenditures..... ▶	

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Mrs. Teresa Doyle [Electronically Filed] Date M M M / D D D / Y Y Y Y Y Y
12 / 22 / 2014

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) TEXAS RIGHT TO LIFE POLITICAL ACTION C	FEC IDENTIFICATION NUMBER ▼ C C00419242
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on M M M / D D D / Y Y Y Y Y Y	

Full Name of Payee Advanced Litho Printing	Date of Public Distribution/Dissemination M M M / D D D / Y Y Y Y Y Y
Mailing Address 226 9th Avenue South	Amount 10.07
City Great Falls	State MT
Zip Code 59405	Transaction ID : SE.5486
Purpose of Expenditure PRINTING NEWSLETTER WITH VOTER GUIDE	Date of Disbursement or Obligation M M M / D D D / Y Y Y Y Y Y 11 / 03 / 2014
Name of Federal Candidate BRIAN BABIN	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate District: 36 State: TX
Calendar Year-To-Date Per Election for Office Sought 10.07	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶

Full Name of Payee United States Postal Service	Date of Public Distribution/Dissemination M M M / D D D / Y Y Y Y Y Y
Mailing Address 6500 De Moss Dr	Amount 3.80
City Houston	State TX
Zip Code 77074	Transaction ID : SE.5416
Purpose of Expenditure POSTAGE FOR NEWSLETTER WITH VOTER GUIDE	Date of Disbursement or Obligation M M M / D D D / Y Y Y Y Y Y 11 / 06 / 2014
Name of Federal Candidate JOHN CORNYN	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: State: TX
Calendar Year-To-Date Per Election for Office Sought 13.86	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	13.87
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	
(c) TOTAL Independent Expenditures..... ▶	

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Mrs. Teresa Doyle **[Electronically Filed]** Date M M M / D D D / Y Y Y Y Y Y
12 / 22 / 2014

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) TEXAS RIGHT TO LIFE POLITICAL ACTION C	FEC IDENTIFICATION NUMBER ▼ C C00419242
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on M M M / D D D / Y Y Y Y Y Y	

Full Name of Payee United States Postal Service	Date of Public Distribution/Dissemination M M M / D D D / Y Y Y Y Y Y
Mailing Address 6500 De Moss Dr	Amount 3.80
City State Zip Code Houston TX 77074	Transaction ID : SE.5417 Date of Disbursement or Obligation M M M / D D D / Y Y Y Y Y Y 11 / 06 / 2014
Purpose of Expenditure POSTAGE FOR NEWSLETTER WITH VOTER GUIDE	Category/Type 001
Name of Federal Candidate LOUIE GOHMERT	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate District: 01 State: TX
Calendar Year-To-Date Per Election for Office Sought 13.86	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶

Full Name of Payee United States Postal Service	Date of Public Distribution/Dissemination M M M / D D D / Y Y Y Y Y Y
Mailing Address 6500 De Moss Dr	Amount 3.80
City State Zip Code Houston TX 77074	Transaction ID : SE.5418 Date of Disbursement or Obligation M M M / D D D / Y Y Y Y Y Y 11 / 06 / 2014
Purpose of Expenditure POSTAGE FOR NEWSLETTER WITH VOTER GUIDE	Category/Type 001
Name of Federal Candidate TED POE	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate District: 02 State: TX
Calendar Year-To-Date Per Election for Office Sought 13.86	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	7.60
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	
(c) TOTAL Independent Expenditures..... ▶	

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Mrs. Teresa Doyle **[Electronically Filed]** Date M M M / D D D / Y Y Y Y Y Y
12 / 22 / 2014

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) TEXAS RIGHT TO LIFE POLITICAL ACTION C	FEC IDENTIFICATION NUMBER ▼ C C00419242
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on M M M / D D D / Y Y Y Y Y Y	

Full Name of Payee United States Postal Service	Date of Public Distribution/Dissemination M M M / D D D / Y Y Y Y Y Y
Mailing Address 6500 De Moss Dr	Amount 3.80
City State Zip Code Houston TX 77074	Transaction ID : SE.5419 Date of Disbursement or Obligation M M M / D D D / Y Y Y Y Y Y
Purpose of Expenditure POSTAGE FOR NEWSLETTER WITH VOTER GUIDE	Category/Type 001
Name of Federal Candidate SAMUEL R HON. JOHNSON	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate District: 03 State: TX
Calendar Year-To-Date Per Election for Office Sought 13.86	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶

Full Name of Payee United States Postal Service	Date of Public Distribution/Dissemination M M M / D D D / Y Y Y Y Y Y
Mailing Address 6500 De Moss Dr	Amount 3.80
City State Zip Code Houston TX 77074	Transaction ID : SE.5423 Date of Disbursement or Obligation M M M / D D D / Y Y Y Y Y Y
Purpose of Expenditure POSTAGE FOR NEWSLETTER WITH VOTER GUIDE	Category/Type 001
Name of Federal Candidate JEB MR. HENSARLING	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate District: 05 State: TX
Calendar Year-To-Date Per Election for Office Sought 13.86	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	7.60
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	
(c) TOTAL Independent Expenditures..... ▶	

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Mrs. Teresa Doyle [Electronically Filed] Date M M M / D D D / Y Y Y Y Y Y

Signature 12 22 2014

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
TEXAS RIGHT TO LIFE POLITICAL ACTION C
FEC IDENTIFICATION NUMBER
C C00419242
Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee: United States Postal Service
Mailing Address: 6500 De Moss Dr
City: Houston State: TX Zip Code: 77074
Purpose of Expenditure: POSTAGE FOR NEWSLETTER WITH VOTER GUIDE
Category/Type: 001
Date of Public Distribution/Dissemination: 11/06/2014
Amount: 3.80
Transaction ID: SE.5425
Name of Federal Candidate: JOE LINUS BARTON
Support: [X] Oppose: []
Office Sought: House [X] Senate []
District: 07 State: TX
Disbursement For: Primary [] General [X] Other []
Calendar Year-To-Date Per Election for Office Sought: 13.86

Full Name of Payee: United States Postal Service
Mailing Address: 6500 De Moss Dr
City: Houston State: TX Zip Code: 77074
Purpose of Expenditure: POSTAGE FOR NEWSLETTER WITH VOTER GUIDE
Category/Type: 001
Date of Public Distribution/Dissemination: 11/06/2014
Amount: 3.80
Transaction ID: SE.5427
Name of Federal Candidate: KEVIN BRADY
Support: [X] Oppose: []
Office Sought: House [X] Senate []
District: 08 State: TX
Disbursement For: Primary [] General [X] Other []
Calendar Year-To-Date Per Election for Office Sought: 13.86

(a) SUBTOTAL of Itemized Independent Expenditures: 7.60
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Mrs. Teresa Doyle
[Electronically Filed]
Date: 12/22/2014
Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
TEXAS RIGHT TO LIFE POLITICAL ACTION C
FEC IDENTIFICATION NUMBER
C C00419242
Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee: United States Postal Service
Mailing Address: 6500 De Moss Dr
City: Houston State: TX Zip Code: 77074
Purpose of Expenditure: POSTAGE FOR NEWSLETTER WITH VOTER GUIDE
Category/Type: 001
Date of Public Distribution/Dissemination: 11/06/2014
Amount: 3.79
Transaction ID: SE.5432
Name of Federal Candidate: BILL FLORES
Support: [X] Oppose: []
Office Sought: House [X] Senate []
District: 17 State: TX
Calendar Year-To-Date Per Election for Office Sought: 13.86
Disbursement For: Primary [] General [X] Other []

Full Name of Payee: United States Postal Service
Mailing Address: 6500 De Moss Dr
City: Houston State: TX Zip Code: 77074
Purpose of Expenditure: POSTAGE FOR NEWSLETTER WITH VOTER GUIDE
Category/Type: 001
Date of Public Distribution/Dissemination: 11/06/2014
Amount: 3.79
Transaction ID: SE.5434
Name of Federal Candidate: RANDY NEUGEBAUER
Support: [X] Oppose: []
Office Sought: House [X] Senate []
District: 19 State: TX
Calendar Year-To-Date Per Election for Office Sought: 13.86
Disbursement For: Primary [] General [X] Other []

(a) SUBTOTAL of Itemized Independent Expenditures: 7.58
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Mrs. Teresa Doyle
[Electronically Filed]
Date: 12/22/2014
Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
TEXAS RIGHT TO LIFE POLITICAL ACTION C
FEC IDENTIFICATION NUMBER
C C00419242
Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee
United States Postal Service
Mailing Address
6500 De Moss Dr
City
Houston State
TX Zip Code
77074
Date of Public Distribution/Dissemination
Amount
3.79
Transaction ID : SE.5438
Date of Disbursement or Obligation
11 / 06 / 2014
Purpose of Expenditure
POSTAGE FOR NEWSLETTER WITH VOTER GUIDE
Category/Type
001
Name of Federal Candidate
KENNY E MR. MARCHANT
Support
Office Sought: House District: 24
State: TX
Calendar Year-To-Date
Per Election for Office Sought
13.86
Disbursement For: General
2014

Full Name of Payee
United States Postal Service
Mailing Address
6500 De Moss Dr
City
Houston State
TX Zip Code
77074
Date of Public Distribution/Dissemination
Amount
3.79
Transaction ID : SE.5439
Date of Disbursement or Obligation
11 / 06 / 2014
Purpose of Expenditure
POSTAGE FOR NEWSLETTER WITH VOTER GUIDE
Category/Type
001
Name of Federal Candidate
ROGER WILLIAMS
Support
Office Sought: House District: 25
State: TX
Calendar Year-To-Date
Per Election for Office Sought
13.86
Disbursement For: General
2014

(a) SUBTOTAL of Itemized Independent Expenditures..... 7.58
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures.....

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Mrs. Teresa Doyle
[Electronically Filed]
Date
12 / 22 / 2014
Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) TEXAS RIGHT TO LIFE POLITICAL ACTION C	FEC IDENTIFICATION NUMBER ▼ C C00419242
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on M M M / D D D / Y Y Y Y Y Y	

Full Name of Payee United States Postal Service	Date of Public Distribution/Dissemination M M M / D D D / Y Y Y Y Y Y
Mailing Address 6500 De Moss Dr	Amount 3.79
City State Zip Code Houston TX 77074	Transaction ID : SE.5442 Date of Disbursement or Obligation M M M / D D D / Y Y Y Y Y Y 11 / 06 / 2014
Purpose of Expenditure POSTAGE FOR NEWSLETTER WITH VOTER GUIDE	Category/Type 001
Name of Federal Candidate MICHAEL C DR. BURGESS	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate District: 26 State: TX
Calendar Year-To-Date Per Election for Office Sought 13.86	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶

Full Name of Payee United States Postal Service	Date of Public Distribution/Dissemination M M M / D D D / Y Y Y Y Y Y
Mailing Address 6500 De Moss Dr	Amount 3.80
City State Zip Code Houston TX 77074	Transaction ID : SE.5445 Date of Disbursement or Obligation M M M / D D D / Y Y Y Y Y Y 11 / 06 / 2014
Purpose of Expenditure POSTAGE FOR NEWSLETTER WITH VOTER GUIDE	Category/Type 001
Name of Federal Candidate JOHN LEE RATCLIFFE	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate District: 04 State: TX
Calendar Year-To-Date Per Election for Office Sought 57.57	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	7.59
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	
(c) TOTAL Independent Expenditures..... ▶	

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Mrs. Teresa Doyle

[Electronically Filed]

Signature _____ Date M M M / D D D / Y Y Y Y Y Y
12 / 22 / 2014

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) TEXAS RIGHT TO LIFE POLITICAL ACTION C	FEC IDENTIFICATION NUMBER ▼ C C00419242
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on M M M / D D D / Y Y Y Y Y Y	

Full Name of Payee United States Postal Service	Date of Public Distribution/Dissemination M M M / D D D / Y Y Y Y Y Y
Mailing Address 6500 De Moss Dr	Amount 3.79
City State Zip Code Houston TX 77074	Transaction ID : SE.5449 Date of Disbursement or Obligation M M M / D D D / Y Y Y Y Y Y 11 / 06 / 2014
Purpose of Expenditure POSTAGE FOR NEWSLETTER WITH VOTER GUIDE	Category/Type 001
Name of Federal Candidate PETE SESSIONS	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate District: 32 State: TX
Calendar Year-To-Date Per Election for Office Sought 13.86	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶

Full Name of Payee United States Postal Service	Date of Public Distribution/Dissemination M M M / D D D / Y Y Y Y Y Y
Mailing Address 6500 De Moss Dr	Amount 3.79
City State Zip Code Houston TX 77074	Transaction ID : SE.5450 Date of Disbursement or Obligation M M M / D D D / Y Y Y Y Y Y 11 / 06 / 2014
Purpose of Expenditure POSTAGE FOR NEWSLETTER WITH VOTER GUIDE	Category/Type 001
Name of Federal Candidate SUSAN NARVAIZ	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate District: 35 State: TX
Calendar Year-To-Date Per Election for Office Sought 13.86	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	7.58
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	
(c) TOTAL Independent Expenditures..... ▶	

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Mrs. Teresa Doyle

[Electronically Filed]

Date M M M / D D D / Y Y Y Y Y Y
12 / 22 / 2014

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
TEXAS RIGHT TO LIFE POLITICAL ACTION C
FEC IDENTIFICATION NUMBER
C C00419242
Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee: United States Postal Service
Mailing Address: 6500 De Moss Dr
City: Houston State: TX Zip Code: 77074
Purpose of Expenditure: POSTAGE FOR NEWSLETTER WITH VOTER GUIDE
Category/Type: 001
Name of Federal Candidate: BRIAN BABIN
Support: [X]
Office Sought: House District: 36 State: TX
Calendar Year-To-Date Per Election for Office Sought: 13.86
Disbursement For: General 2014

Full Name of Payee: United States Postal Service
Mailing Address: 6500 De Moss Dr
City: Houston State: TX Zip Code: 77074
Purpose of Expenditure: POSTAGE FOR NEWSLETTER WITH VOTER GUIDE
Category/Type: 001
Name of Federal Candidate: JOHN CULBERSON
Support: [X]
Office Sought: House District: 07 State: TX
Calendar Year-To-Date Per Election for Office Sought: 17.66
Disbursement For: General 2014

Table with 2 columns: Description and Amount.
(a) SUBTOTAL of Itemized Independent Expenditures: 7.59
(b) SUBTOTAL of Unitemized Independent Expenditures:
(c) TOTAL Independent Expenditures: 346.48

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.
Mrs. Teresa Doyle
[Electronically Filed]
Date: 12 / 22 / 2014